# BEST AVAILABLE COPY

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND OR OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response. . . . . . 16.00

SEC U	SE ONLY
Prefix	Serial 
DATE	RECEIVED
1	1 1

UNIFORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	73N 7986
Facilitation of South Tulsa County Bridge Project	2 / 20X
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Z Rule 506 Section 4(6)	☑ ULOE
Type of Filing:	-
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
Infrastructure Venture I, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
5121 S. Wheeling Ave., Tulsa, OK 74105	(918) 743-4422
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	^ /
Infrastructure development	Y PROCECO
Type of Business Organization	
	(please specify):
	na limited liability cangany
Actual or Estimated Date of Incorporation or Organization: Month Year  Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Sta	imated FINANCIAL
CN for Canada; FN for other foreign jurisdiction)	OR

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### - ATTENTION -

Failure to tile notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			A BASIC IDE	NTÍI	TEATION DÂTA:				
Enter the information rec	quested for the fo	llowing	;						
<ul> <li>Each promoter of the</li> </ul>	ne issuer, if the is	suer ha	s been organized w	ithin t	he past five years;				
<ul> <li>Each beneficial owr</li> </ul>	er having the po	ver to vo	ote or dispose, or dir	ect th	e vote or disposition	of, 10	% or more o	f a clas	s of equity securities of the issu
<ul> <li>Each executive offi</li> </ul>	cer and director	of corpo	rate issuers and of	corpo	rate general and mar	aging	partners of	partne	rship issuers; and
<ul> <li>Each general and m</li> </ul>	ianaging partner	of partn	ership issuers.						
heck Box(es) that Apply:	✓ Promoter	Ø	Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
ill Name (Last name first, if acon, William S.	f individual)								
usiness or Residence Addres 257 E. 61st Street, Tulsi		l Street,	City, State, Zip Co	ide)			·		
heck Box(es) that Apply:	Promoter	Ø	Beneficial Owner	Z	Executive Officer		Director		General and/or Managing Partner
ull Name (Last name first, it Kelsey, Howard L.	f individual)				· · · · · · · · · · · · · · · · · · ·				
usiness or Residence Addres 726 E. 103rd Street, Tuls	•	Street,	City, State, Zip Co	ide)					
Theck Box(es) that Apply:	✓ Promoter	Ø	Beneficial Owner	Z	Executive Officer		Director		General and/or Managing Partner
ull Name (Last name first, i Parmele, Jr., Robert L.	f individual)								
usiness or Residence Addre	ss (Number an	d Street,	, City, State, Zip Co	ode)					<del></del>
423 S. Gary Ave., Tulsa,	OK 74137		·····						
heck Box(es) that Apply:	Promoter	Z	Beneficial Owner	Ø	Executive Officer		Director		General and/or Managing Partner
ull Name (Last name first, i	f individual)								
oung, Francis A.				<del></del> -					
lusiness or Residence Addre 5121 S. Wheeling Ave., 1	•		, City, State, Zip Co	005)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
ull Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number an	d Street	, City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
ull Name (Last name first, i	f individual)		· · · · · · · · · · · · · · · · · · ·						
Business or Residence Addre	ss (Number an	d Street	, City, State, Zip Co	ode)					
Check Box(es) that Apply:	Promater	. []	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
ull Name (Last name first, i	f individual)					··· -			
Business or Residence Addre	ess (Number an	d Street	, City, State, Zip Co	ode)			<del></del>		
<del></del>	(lise h	lank she	et, or copy and use	additi	onal copies of this s	heet.	as necessary	/)	<del> </del>

		A			у В. Г	NFORMATI	ON ÁBOU	T OFFERI	NG*				
1.	Has the	issuer sold	or does th	e issuer in	itend to se	li, to non-ac	ccredited is	nvestors in	this offeri	no?		Yes	No
1.	1103 (110	133401 3014	, 01 4003 111							_		u	<u> </u>
2.	Whatic	Answer also in Appendix, Column 2, if filing under ULOE.  What is the minimum investment that will be accepted from any individual?										c 1,5	00.000,00
4.	What is the milliman investment that will be accepted from any individual immediately									•••••	Yes	No	
3.	Does the offering permit joint ownership of a single unit?											<b>Z</b>	
4.	commis If a pers or states	sion or simi on to be list s, list the na	lar remune ed is an ass me of the b	ration for s lociated pe roker or de	olicitation rson or age aler. If mo	of purchase int of a brok	ers in conne er or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in the EC and/or	irectly, any he offering. with a state ons of such		
	l Name (I	Last name i	first, if indi	vidual)									
		Residence	Address (N	umber and	Street, C	ity, State, Z	ip Code)			<del></del>			
-						,, =, =							
Na	me of Ass	sociated Br	oker or De	aler									
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)			**************	***************************************	***************************************		☐ All	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	(FL)	GA	HI	ID
	TL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	M	NM	NY	NC	ND	OH	OK)	OR	PA
	RI	[SC]	SD	TN	TX	UT	VT	[VA]	WA	$[\underline{\mathbf{w}}\mathbf{v}]$	WI	WY	PR
Ful	ll Name (	Last name	first, if ind	ividual)		-						<del></del>	
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)		<del></del>				
Na	ma of Ass	sociated Br	oker or De	aler									
INA	ille of V2	sociated bi	okel di De	aici									
Sta	ites in Wi	nich Person	Listed Ha	s Solicited	or Intende	to Solicit	Purchasers						
	(Check	"All States	or check	individual	States)	•••••					******************	☐ Al	States
	AL	AK	(AZ)	AR	CA	[ <u>co]</u>	[CT]	DE	DC	FL	GA	HI	ĪD
		NI.	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	[VT]	VA	WA	WV	WI	WY	PR
Fu	li Name (	Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (	Number an	nd Street, C	City, State,	Zip Code)				<del></del>		
													<del></del>
Na	me of As	sociated Bi	roker or De	aler									
Sta	ates in W	hich Persor	Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	l States)	•••••••						☐ Al	States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	[N]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE]		NH	NJ TX	NM UT	NY VT	NC VA	ND WA	OH)	OK]	OR WY	PA PR
	RI	[SC]	SD	TN	لككا	MT	VT	VA	WA	WV	WI	V7 I	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	. c. offering price; number of investors, expenses and use of p	ROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	4,500,000.0	0 <sub>\$</sub> 1,500,000.00
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	5	_ \$
	Partnership Interests		
	Other (Specify)	5	\$
	Total	4,500,000.0	0 \$ 1,500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	s_0.00
	Non-accredited Investors	0	§ 0.00
	Total (for filings under Rule 504 only)	0	\$ 0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		•
	Regulation A		
	Rule 504	<del></del>	
	Total		s_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	ſ	
	Printing and Engraving Costs		¬ s
	Legal Fees		
	Accounting Fees	-	
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)	-	s
	Other Expenses (identify)	-	
	T ::1	-	= 0.00

,	C OFFERING PRICE	NUMBER OF INVESTORS, EXPENSES A	nd use of proceeds	
	b. Enter the difference between the aggregat and total expenses furnished in response to Par proceeds to the issuer."	rt C - Question 4.a. This difference is the "	adjusted gross	1,500,000.00 S
5.	Indicate below the amount of the adjusted greach of the purposes shown. If the amount check the box to the left of the estimate. The proceeds to the issuer set forth in response	for any purpose is not known, furnish an total of the payments listed must equal the a	estimate and	
			Payments to Officers, Directors, & Affiliates	Others
	Salaries and fees		s	_ 🗆 \$
	Purchase of real estate			_ Ds
	Purchase, rental or leasing and installation and equipment	of machinery	<b>□ \$</b>	
	Construction or leasing of plant buildings a		<del></del>	_
	Acquisition of other businesses (including offering that may be used in exchange for t	the value of securities involved in this he assets or securities of another		
	issuer pursuant to a merger)			
	Repayment of indebtedness			_ 🗆 \$
	Working capital			
	Other (specify): interest rate lock for cons	struction financing		_ \$ 1,500,000.0
	and	· · · · · · · · · · · · · · · · · · ·	·	
	debt service reserve account		\$	_ S 2 3,000,000.0
	Column Totals			
	Total Payments Listed (column totals added	d)		4,500,000.00
		DEFORDATEICNATURE	## <b>7</b> # 1 # 3   7   7   7   7   7   7   7   7   7	
	(2) (2) (2) (2) (2) (2) (2) (2) (2) (2)		Bellia Serie (A) (1)	5 + 5 & 4 + 2 & BM x
sig	e issuer has duly caused this notice to be signed nature constitutes an undertaking by the issue information furnished by the issuer to any n	r to furnish to the U.S. Securities and Exch	ange Commission, upon writi	
lss	uer (Print or Type)	Signature	Date	
'n	frastructure Venture I, LLC	William S. Ma	ERRU 5-10-	05
٧a	me of Signer (Print or Type)	Title of Signer (Print or Type)	<del></del>	
	liam S. Bacon	Manager		

## ---- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E STATE SIGNATURE CO		
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>F</b> €l
		_

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Infrastructure Venture I, LLC	Signature Date 5-10-05
Name (Print or Type)	Title (Print or Type)
William S. Bacon	Manager

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				iste e Stap	PENDIX 📝				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL		×							×
AK		×							×
ΑZ		×							×
AR		×							×
CA		×							×
co		×							X
CT		×							×
DE		×							×
DC		×							×
FL		×		ļ					×
GA		x		<u> </u>					×
HI		×							×
ID		×		ļ					×
IL		×							×
IN		×							×
IA		K							K
KS		×							×
KY		×							×
LA		×		ļ					×
ME		×							×
MD		×							×
MA				<u> </u>					×
MI		×							×
MN		×							×
MS		×							×

		1/1		APP!	ENDIX:				
I	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				under Sta (if yes, explana	ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО		×							×
MT		×							×
NE		×							×
NV		×							×
NH		×							×
NJ		×							×
NM		K							×
NY		×							×
NC		×							K
ND		×							×
ОН	<u> </u>	×							×
ОК		×							×
OR		×							×
PA		×				<u> </u>	I		×
RI		×							×
SC		×							×
SD		×							×
TN		×							×
TX		×	Debt \$4,500,000	1	\$1,500,000.	O	\$0.00		×
UT		×			}				×
VT		×							×
VA		×							×
WA		×							×
wv	·	×							×
WI		×							×

	法法			≤4 C;	ENDLX				
1	Type of security Intend to sell to non-accredited investors in State (Part B-Item 1)  Type of security and aggregate offering price offered in state (Part C-Item 1)				under Sta (if yes, explan- waiver	ification ate ULOE attach ation of granted)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WY		×							×
PR		×							×